## PART B -FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  21874  EDWARDS ANGELL PALMER & DODGE LLP  P.O. Box 55874  Boston, Massachusetts 02205					Note: A cetificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This cetificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of maling or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Fostal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address show, or being facisimile transmitted to the USPTO 6731 273-2885, on the date indicated below.  Peter C. Lauro, Esq. (Deposits name)			
					/Peter C. Lauro/		(Signature)	
					September 3, 2009		(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET N	O. CONFIRMATION NO.	
10/600,003	10/600,003 Dana M. Fowlkes					60638CIP2(50370) 6034		
TITLE OF INVENTION	N: YEAST CELLS	ENGINEEREI	O TO PRODU	JCE PHERM	ONE SYSTEM	1 PROTEIN SURROGATE	S, AND USES THEREFOR	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICA	ATION FEE	TOTAL FEE(S) DUE	DATE DUE	
Non-Provisional	по	\$1,510.00		\$3	00.00	\$1,840.00	09/15/2009	
EXAMINER				CLASS-S	UBCLASS			
M. T. Brannock 16 1. Change of correspondence address or indication of "Fee								
Address <sup>1</sup> (37 CFR 1.36  Change of cor Correspondence  "Fee Address" is form PTO/SB/4	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a shigh from fustoring as a nombor up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed  are to 1 registered patent attorneys or agents. If no name is listed, no name will be printed.							
Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government								
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Payment by credit card. From PTU-2038 is attached.   Payment by credit card. From PTU-2038 is attached.   X Advance Order #0 of Copies								
a. Applicant clai	atus (from status indicate ims SMALL ENTTFY sta ) is requested to apply the I	tus. See 37 CF				r claiming SMALL ENTITY	status. See 37 CFR 1.27(g)(2).	
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